

**2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N23000003320

**Entity Name:** ENCORE AT HALIFAX PLANTATION HOMEOWNER'S ASSOCIATION, INC.

**Current Principal Place of Business:**

1451 N. US HWY 1, SUITE 13  
ORMOND BEACH, FL 32174

**Current Mailing Address:**

1451 N. US HWY 1, SUITE 13  
ORMOND BEACH, FL 32174 US

**FEI Number:** APPLIED FOR

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

VANACORE, JOHN S  
1451 N. US HWY 1, SUITE 13  
ORMOND BEACH, FL 32174 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

**SIGNATURE:**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title D P  
Name JOHN S. VANACORE  
Address 1451 N. US HWY 1, SUITE 13  
City-State-Zip: ORMOND BEACH FL 32174

Title D VP  
Name JOSEPH T. VANACORE  
Address 1451 N. US HWY 1, SUITE 13  
City-State-Zip: ORMOND BEACH FL 32174

Title S T  
Name JOSEPH T. VANACORE  
Address 1451 N. US HWY 1, SUITE 13  
City-State-Zip: ORMOND BEACH FL 32174

Title D  
Name NANCY COLLINS  
Address 1451 N. US HWY 1, SUITE 13  
City-State-Zip: ORMOND BEACH FL 32174

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** JOSEPH T VANACORE

**VICE PRESIDENT**

**03/11/2024**

Electronic Signature of Signing Officer/Director Detail

Date